



## Provider Communication

<b>Subject:</b> Pharmacy Changes from Express Scripts	<b>Priority:</b> <b>High</b>
<b>Date:</b> August 29, 2003	<b>Message ID:</b> ACSBNR-082903-1

### “GMAC Changes” Effective 10-1-2003

Prilosec® 20mg capsule will become “Non-Preferred” on the Georgia DCH Preferred Drug List when it is added to the GMAC list at \$3.131 per capsule. The current GMAC for generic omeprazole 20mg is set at \$3.131 per capsule. Effective 10/1/2003 the GMAC will change to \$2.970.

For an up-to-date GMAC list, please check [www.ghp.georgia.gov](http://www.ghp.georgia.gov), click provider information, Medicaid manuals, then Georgia Maximum Allowable Cost List. The list for 10/1/03 will be available on the website within the next 10 days.

### “Quantity Level Limits” Effective 10-1-2003

Plavix® 75 mg will be limited to (35) tablets per calendar month. This limit provides for a loading dose when necessary. For patients to continue receiving more than 75mg per day, a prior authorization will be required. Please contact Express Scripts at 877-650-9340 to obtain prior approval.

Duragesic® patches will be limited to (25) per calendar month. A written clinical appeal to DCH by the prescriber is required to obtain any quantity in excess of 25.

Femring® will be limited to (4) rings per calendar year.

Oxytrol® will be limited to (1) box per calendar month.

### Prior Approval Changes” EFFECTIVE 10-1-2003

Additions: Zetia® will require prior approval.

Vfend® will require prior approval.

**Note:** Please share this information with appropriate staff. If you are the corporate office of a chain pharmacy, please provide this information to each of your stores located in Georgia. If you have additional questions or concerns regarding this notification, please contact Express Scripts, 1-877-650-9340.